

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	he		6/17/01
O.I.P.E. CLASSIFIER		49	9/1/01
FORMALITY REVIEW	M.E.	1102	10/10/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ Rejected N Non-elected
- Allowed I Interference
(Through numeral)..... Canceled A Appeal
÷ Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
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Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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